

## How you can manage some symptoms on your own

### Flu-like symptoms:

Typically, these include a low-grade fever, chills, headache, muscle and joint aches, fatigue, and weakness, most pronounced during the first month of treatment and diminish as treatment progresses. Using a tablet of Crocin an hour before taking the interferon shot helps manage fever, nausea, fatigue & body ache. Here are some more tips....

### Nausea

Eating smaller, more frequent meals may be helpful. Ginger may be helpful for nausea and can be found in tea, ale, and ginger snap cookies. Avoid smells and foods that trigger nausea. Use Prochlorperazine (Stemetil) 1 or 2 of a 5 mg tablet, every 8-12 hours when nausea occurs. Those who have used Stemetil before & have experienced problems with it should seek to the doctor for a substitute.



**Fever** over 101° F (38.5° C) for more than 24-48 hours, or not following an interferon injection, should prompt a medical evaluation for an infectious source.

### Bodyache (muscle pains & joint pains)

A hot bath or use of a hot tub may be helpful.

### Fatigue

Get plenty of sleep, keep well-hydrated, and eat well-balanced meals to maintain their weight if possible.

### Headache

Again, the Crocin tablet is preferred. Nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin (Disprin, Colasprin), ibuprofen (Brufen, Ibugesic, Flexon or Magadol) or Diclofenac / Aceclofenac generally should not be used in patients with significant liver scarring or cirrhosis. These drugs may cause gastrointestinal bleeding or renal failure. Anti migraine medications may be helpful for patients who have a history of migraines.

**Sudden worsening of symptoms on treatment:** if your symptoms of flu, nausea, vomiting, etc increase suddenly without any reason; or your eyes seem yellow due to jaundice, you may be getting a "flare". This could happen normally as part of the interferon killing off the virus; but it could be if the effect of the interferon has reduced. You may need to see your doctor immediately.

In case you see any other doctor for non liver related complaints; be sure he does not unknowingly give you steroids in his prescription. They may induce a flare of viral multiplication and cause such symptoms.

### Difficulties with eating:

Patients who are treated with IFN often complain of a lack of appetite, weight loss, and feeling "full" soon after starting to eat. However, since proper nutrition is key to being able to complete the full course of interferon therapy, you should try eating small, frequent meals, use high-protein supplements (nutrient bars, cheese, eggs, ground nuts, etc), and take multivitamins. If taste sensation is altered, try lemon drops. And don't be shy about asking family or friends to help prepare your meals! Certain things you do may injure the liver & reduce appetite. Refrain from drinking alcohol or taking any anesthetics or statin medications.

### Diarrhea

Avoid or limit caffeine-containing beverages (such as coffee and cola) and high-sugar soft drinks. Limiting of lactose-containing foods may be helpful in some patients. Boiled rice, apples, bananas, oatmeal, and bulking agents such as Isabgol can help solidify stool. If this has not worked, speak to your doctor. Once other causes of diarrhea are deemed unlikely, oral antidiarrheal agents can be used, eg, loperamide (Imodium) 2 mg capsules, 2 initially then 1 after each loose stool to a maximum of 4 per 24 hours; or diphenoxylate/atropine (Lomotil) 2.5 mg/0.025 mg, 2 tablets up to 4 times daily.

## Moods & Depression:

The most frequently reported IFN-related psychiatric side effects are depression and irritability, but also common are apathy, sleep disturbances, tremor, sexual dysfunction, memory loss, manic symptoms, cognitive dysfunction, and suicidal thoughts. **Depression** develops in 20-35% of patients treated with interferon. Tell your doctor or nurse if you are feeling especially depressed so that antidepressant drugs can be considered. On the other hand, if you experience mania, bipolar symptoms, or severe mood changes, you may need emergency consultation with a psychiatrist.



## Irritability

You should be aware that the medications will predispose you to temper flares, so you should anticipate them and control them more effectively. Take your family & associates into confidence about your illness (your spouse or close friends, if possible). They will understand if they know well before if you have a quick temper and be less understanding during treatment.

Patients should be aware that job circumstances may exacerbate these symptoms and that making arrangements for maximal job flexibility and limitation of stress at work can be extremely helpful. Try relaxation techniques (eg, take a deep breath and count to 10). Share your feelings with friends and family.

## Insomnia

Improvement in sleep habits to the degree possible, with sleeping principally at night, not reading or watching television in bed. Limit fluid intake at night to avoid having to get up to go to the bathroom. Avoid stimulants, such as caffeine, at night.

Medication sleep aids may be helpful in some patients. Patients always should be aware that these medicines may impair driving or work performance and should not be used in combination with other sedatives, including alcohol. Cap. Benadry SG; a non habit-forming diphenhydramine, can be taken 25-50 mg orally at bedtime as needed. However, be careful in case it causes headache, dry mouth, difficulty urinating, or weakness.

## Skin rash

You may see a fine, red, petechial or reticular rash, and tends to be seen over the arms and trunk, although it may be present diffusely. It tends to improve and recur spontaneously during treatment.

You can use topical therapies, starting with moisturizing lotions (Nivea) if they do not work, you doctor may advise low-dose steroid creams for itching.

Oral medications such as diphenhydramine may be helpful if topical therapies do not relieve symptoms.

For skin rash developing at injection sites, changing sites is often helpful.

Approximately one third of patients develop noticeable **Hair Loss** while on therapy.

When present, the hair loss tends to be gradual, not patchy as with systemic chemotherapy. Subtle hair loss is even more common. Avoid pulling on the hair, stop braiding it or putting it in pleats, and avoiding vigorous combing. Using a wide-tooth comb may be helpful. Use of harsh hair products (shampoos, shikakai, etc) may also contribute to hair loss, and should be avoided. Your hair will grow back gradually to essentially pre-treatment levels after interferon is stopped.